

Behested Payment Report

A Public Document

Behested Payment Report

1. Elected Officer or CPUC Member (Last name, First name)

McNutt, Diane

Agency Name

Town of Los Gatos

Agency Street Address

110 E. Main St Los Gatos CA 95030

Designated Contact Person (Name and title, if different)

Area Code/Phone Number

408-354-1242

E-mail (Optional)

dmcnutt@losgatosca.gov

Date Stamp

OCT 21 2013

TOWN OF LOS GATOS
CLERK DEPARTMENT

California Form 803

For Official Use Only

☐ Amendment (See Part 5)

Date of Original Filing: 10/21/2013
(month, day, year)

2. Payor Information (For additional payors, include an attachment with the names and addresses.)

Cupertino Library Foundation

Name

10800 Torre Ave

Cupertino

CA

95014

Address

City

State

Zip Code

3. Payee Information (For additional payees, include an attachment with the names and addresses.)

Silicon Valley Reads/San Jose Public Library Foundation

Name

150 E. San Fernando St

San Jose

CA

95112

Address

City

State

Zip Code

4. Payment Information (Complete all information.)

Date of Payment: 10/15/2013
(month, day, year)

Amount of Payment: (In-Kind FMV) \$ 5,000.00
(Round to whole dollars.)

Payment Type: ☒ Monetary Donation or ☐ In-Kind Goods or Services (Provide description below.)

Brief Description of In-Kind Payment:

Purpose: (Check one and provide description below.) ☐ Legislative ☐ Governmental ☒ Charitable

Describe the legislative, governmental, charitable purpose, or event: Support of Silicon Valley Reads

5. Amendment Description or Comments

6. Verification

I certify, under penalty of perjury under the laws of the State of California, that to the best of my knowledge, the information contained herein is true and complete.

Executed on 10/21/2013
DATE

By Diane McNutt
SIGNATURE OF ELECTED OFFICER OR CPUC MEMBER